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FILED
Apr 22 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000071478 (6)

1. Corporation Name

LAKE BUENA VISTA COMMUNITIES, INC.

Principal Place of Business

1375 BUENA VISTA DRIVE
4TH FLOOR NORTH
LAKE BUENA VISTA FL 32830

Mailing Address

1375 BUENA VISTA DRIVE
4TH FLOOR NORTH
LAKE BUENA VISTA FL 32830

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/18/1997

4. FEI Number

95-2553596

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip Country

24 25 29 91521-0586 30 USA

2a. Mailing Address

26 500 South Buena Vista St.

Suite, Apt #, etc.

27 City & State

28 Burbank, CA

Zip Country

9. Name and Address of Current Registered Agent

IOPPOLO, FRANK S
1375 BUENA VISTA DRIVE
4TH FLOOR NORTH
LAKE BUENA VISTA FL 32830

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME GREEN, JUDSON C
STREET ADDRESS 1375 BUENA VISTA DR, 4TH FLOOR
CITY-ST-ZIP LAKE BUENA VISTA FL 32830

TITLE D ☐ DELETE

NAME LITVACK, SANDORD M
STREET ADDRESS 500 S BUENA VISTA STREET
CITY-ST-ZIP BURBANK CA 91521

TITLE D ☐ DELETE

NAME REED, MARSHA L
STREET ADDRESS 500 S BUENA VISTA STREET
CITY-ST-ZIP BURBANK CA 91521

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President/Director ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 500 S. Buena Vista St.
1.4 CITY-ST-ZIP Burbank, CA 91521

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Assistant Secretary/Director ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Treasurer ☐ Change ☒ Addition
4.2 NAME Carpenter, Farris E.
4.3 STREET ADDRESS 1375 Buena Vista Drive, 4th Floor
4.4 CITY-ST-ZIP Lake Buena Vista, FL 32830

5.1 TITLE Assistant Treasurer ☐ Change ☒ Addition

5.2 NAME Buettner, Anne L.
5.3 STREET ADDRESS 500 S. Buena Vista St.
5.4 CITY-ST-ZIP Burbank, CA 91521

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

(818) 560-1000

CR2E034 (10/97)